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| <b>UTILITY<br/>PATENT APPLICATION<br/>TRANSMITTAL</b>              |  | Attorney Docket No. T-6280  |  |
|  |  | First Inventor ROBERT H. WOLLENBERG   |  |
|  |  | Title PROCESS FOR MAKING GROUP II METAL CARBONATED, OVERBASED MANNICH CONDENSATION PRODUCTS OF ALKYLPHENOLS |  |
| (Only for new nonprovisional applications under 37 C.F.R. 1.53(b)) |  | Express Mail Label No. EV 171090545 US  |  |

  

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| <b>APPLICATION ELEMENTS</b><br>See MPEP chapter 600 concerning utility patent application contents. | <b>ADDRESS TO:</b> Commissioner for Patents<br>Mail Stop Patent Application<br>P.O. Box 1450<br>Alexandria VA 22313-1450 |
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| 1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17)<br>(Submit an original and a duplicate for fee processing)<br>2. <input type="checkbox"/> Applicant claims small entity status.<br>See 37 CFR 1.27.<br>3. <input checked="" type="checkbox"/> Specification [Total Pages 38]<br>(preferred arrangement set forth below)<br>- Descriptive title of the Invention<br>- Cross Reference to Related Applications<br>- Statement Regarding Fed sponsored R & D<br>- Reference to sequence listing, a table, or a computer program listing appendix<br>- Background of the Invention<br>- Brief Summary of the Invention<br>- Brief Description of the Drawings (if filed)<br>- Detailed Description<br>- Claim(s)<br>- Abstract of the Disclosure<br>4. <input type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets ]<br>5. <input type="checkbox"/> Oath or Declaration [Total Sheets ]<br>a. <input type="checkbox"/> Newly executed (original or copy)<br>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d))<br>(for a continuation/divisional with Box 18 completed)<br>i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b><br>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).<br>6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76 | 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)<br>8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)<br>a. <input type="checkbox"/> Computer Readable Form (CRF)<br>b. Specification Sequence Listing on:<br>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or<br>ii. <input type="checkbox"/> paper<br>c. <input type="checkbox"/> Statements verifying identity of above copies<br><b>ACCOMPANYING APPLICATIONS PARTS</b><br>9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))<br>10. <input type="checkbox"/> 37 C.F.R. 3.73(b) Statement [ ] Power of Attorney (when there is an assignee)<br>11. <input type="checkbox"/> English Translation Document (if applicable)<br>12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 [ ] Copies of IDS Citations<br>13. <input type="checkbox"/> Preliminary Amendment<br>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)<br>15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)<br>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.<br>17. <input type="checkbox"/> Other: _____ |
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18. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation    ☐ Divisional    ☐ Continuation-in-part (CIP)    of prior application No: \_\_\_\_\_ / \_\_\_\_\_  
 Prior application information: Examiner \_\_\_\_\_ Art Unit: \_\_\_\_\_

**For CONTINUATION or DIVISIONAL APPS only:** The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

  

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| <b>19. CORRESPONDENCE ADDRESS</b>                   |           |  |  |
| <input checked="" type="checkbox"/> Customer Number |           | <b>34014</b><br>(Insert Customer No. here) | or <input type="checkbox"/> Correspondence address below |
| Name  |           |  |  |
| Address   |           |  |  |
| City  |           | State                                      | Zip Code   |
| Country   | Telephone |  | Fax  |

  

|                   |                  |                                   |                           |
|-------------------|------------------|-----------------------------------|---------------------------|
| Name (Print/Type) | SARITA R. KELLEY | Registration No. (Attorney/Agent) | 50,850                    |
| Signature         | S. Kelley        |                                   | Date<br>November 13, 2003 |

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

|   |                      |   |  |                    |  |             |                   |                      |                      |               |  |          |  |                     |        |
|---|----------------------|---|--|--------------------|--|-------------|-------------------|----------------------|----------------------|---------------|--|----------|--|---------------------|--------|
| <h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2004</h2> <p style="font-size: small; margin: 5px 0;">Effective 10/01/2003. Patent fees are subject to annual revision.</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p> |                      | <p><b>Complete if Known</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>Application Number</td><td></td></tr> <tr><td>Filing Date</td><td>November 13, 2003</td></tr> <tr><td>First Named Inventor</td><td>ROBERT H. WOLLENBERG</td></tr> <tr><td>Examiner Name</td><td></td></tr> <tr><td>Art Unit</td><td></td></tr> <tr><td>Attorney Docket No.</td><td>T-6280</td></tr> </table> |  | Application Number |  | Filing Date | November 13, 2003 | First Named Inventor | ROBERT H. WOLLENBERG | Examiner Name |  | Art Unit |  | Attorney Docket No. | T-6280 |
| Application Number  |                      |   |  |                    |  |             |                   |                      |                      |               |  |          |  |                     |        |
| Filing Date   | November 13, 2003    |   |  |                    |  |             |                   |                      |                      |               |  |          |  |                     |        |
| First Named Inventor  | ROBERT H. WOLLENBERG |   |  |                    |  |             |                   |                      |                      |               |  |          |  |                     |        |
| Examiner Name   |                      |   |  |                    |  |             |                   |                      |                      |               |  |          |  |                     |        |
| Art Unit  |                      |   |  |                    |  |             |                   |                      |                      |               |  |          |  |                     |        |
| Attorney Docket No.   | T-6280               |   |  |                    |  |             |                   |                      |                      |               |  |          |  |                     |        |
| <b>TOTAL AMOUNT OF PAYMENT</b> (\$) 2,056   |                      |   |  |                    |  |             |                   |                      |                      |               |  |          |  |                     |        |

| <b>METHOD OF PAYMENT</b> (check all that apply)  |                           |              |          | <b>FEE CALCULATION</b> (continued)   |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
|--|---------------------------|--------------|----------|--|----------|----------------------|---------------------------|---|----------|----------|----------|--------------|----------|--------------|-----|-----------------|----------|--------------------|----------|----------|----------|------|-----|-------------------|----|-------------------------------------|-----|------|-----|------------------|----|---|-----|------|-----|--------------------|-----|---------------------------|-----|------|-------|------------------------|-------|---|--|------|------|--------------|------|--|---|------|--------|------|--------|---|--------------------|------|-------|------|----|--|----|------|-----|--------------------|-----|---|--|------|-----|------|-----|--|--------------|------|--------------|------|-----------------|---|----------|----------|----------|----------|-------|--|------|------|------------------------|------|------|------------------|------|------|-----------------------------------|------|------|--|------|------|---------------------------------------|------|------|--------------------------|------|------|--|------|-------|---|------|------|--|------|----|----------------------------------|--|------|-------|------|-----|------------------------------------|--|------|-------|------|-----|--------------------------------|--|------|-----|------|-----|------------------|--|------|-----|------|-----|-----------------|--|------|-----|------|-----|-------------------------------|--|------|----|------|----|--------------------------------------|--|------|-----|------|-----|---|--|------|----|------|----|--|--|------|-----|------|-----|---|--|------|-----|------|-----|--|--|------|-----|------|-----|---|--|------|-----|------|-----|---|--|
| <p><input type="checkbox"/> Check   <input type="checkbox"/> Credit card   <input type="checkbox"/> Money   <input type="checkbox"/> Other   <input type="checkbox"/> None Order</p> <p><input checked="" type="checkbox"/> Deposit Account:</p> <table style="width: 100%;"> <tr> <td style="width: 20%;">Deposit Account Number</td> <td>03-1620</td> </tr> <tr> <td>Deposit Account Name</td> <td>ChevronTexaco Corporation</td> </tr> </table> <p>The Director is authorized to: (check all that apply)</p> <p><input checked="" type="checkbox"/> Charge fee(s) indicated below   <input checked="" type="checkbox"/> Credit any overpayments</p> <p><input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application</p> <p><input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.</p>             |                           |              |          | Deposit Account Number   | 03-1620  | Deposit Account Name | ChevronTexaco Corporation | <h3 style="margin: 0;">3. ADDITIONAL FEES</h3> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet.</td><td></td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>1812</td><td>2,520</td><td>1812</td><td>2,520</td><td>For filing a request for reexamination</td><td></td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>1805</td><td>1,840*</td><td>1805</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>1252</td><td>420</td><td>2252</td><td>210</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>1253</td><td>950</td><td>2253</td><td>475</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1254</td><td>1,480</td><td>2254</td><td>740</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>1255</td><td>2,010</td><td>2255</td><td>1,005</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>1401</td><td>330</td><td>2401</td><td>165</td><td>Notice of Appeal</td><td></td></tr> <tr><td>1402</td><td>330</td><td>2402</td><td>165</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>1403</td><td>290</td><td>2403</td><td>145</td><td>Request for oral hearing</td><td></td></tr> <tr><td>1451</td><td>1,510</td><td>1451</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive - unavoidable</td><td></td></tr> <tr><td>1453</td><td>1,330</td><td>2453</td><td>665</td><td>Petition to revive - unintentional</td><td></td></tr> <tr><td>1501</td><td>1,330</td><td>2501</td><td>665</td><td>Utility issue fee (or reissue)</td><td></td></tr> <tr><td>1502</td><td>480</td><td>2502</td><td>240</td><td>Design issue fee</td><td></td></tr> <tr><td>1503</td><td>640</td><td>2503</td><td>320</td><td>Plant issue fee</td><td></td></tr> <tr><td>1460</td><td>130</td><td>1460</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>1807</td><td>50</td><td>1807</td><td>50</td><td>Processing fee under 37 CFR 1.17 (q)</td><td></td></tr> <tr><td>1806</td><td>180</td><td>1806</td><td>180</td><td>Submission of Information Disclosure Stmt</td><td></td></tr> <tr><td>8021</td><td>40</td><td>8021</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td></td></tr> <tr><td>1809</td><td>770</td><td>2809</td><td>385</td><td>Filing a submission after final rejection (37 CFR § 1.129(a))</td><td></td></tr> <tr><td>1810</td><td>770</td><td>2810</td><td>385</td><td>For each additional invention to be examined (37 CFR § 1.129(b))</td><td></td></tr> <tr><td>1801</td><td>770</td><td>2801</td><td>385</td><td>Request for Continued Examination (RCE)</td><td></td></tr> <tr><td>1802</td><td>900</td><td>1802</td><td>900</td><td>Request for expedited examination of a design application</td><td></td></tr> </tbody> </table> <p>Other fee (specify) _____</p> <p>*Reduced by Basic Filing Fee Paid      <b>SUBTOTAL (3)</b> (\$) 0</p> |          |          |          | Large Entity |          | Small Entity |     | Fee Description | Fee Paid | Fee Code           | Fee (\$) | Fee Code | Fee (\$) | 1051 | 130 | 2051              | 65 | Surcharge - late filing fee or oath |     | 1052 | 50  | 2052             | 25 | Surcharge - late provisional filing fee or cover sheet. |     | 1053 | 130 | 1053               | 130 | Non-English specification |     | 1812 | 2,520 | 1812                   | 2,520 | For filing a request for reexamination  |  | 1804 | 920* | 1804         | 920* | Requesting publication of SIR prior to Examiner action |   | 1805 | 1,840* | 1805 | 1,840* | Requesting publication of SIR after Examiner action |                    | 1251 | 110   | 2251 | 55 | Extension for reply within first month |    | 1252 | 420 | 2252               | 210 | Extension for reply within second month |  | 1253 | 950 | 2253 | 475 | Extension for reply within third month |              | 1254 | 1,480        | 2254 | 740             | Extension for reply within fourth month |          | 1255     | 2,010    | 2255     | 1,005 | Extension for reply within fifth month |      | 1401 | 330                    | 2401 | 165  | Notice of Appeal |      | 1402 | 330                               | 2402 | 165  | Filing a brief in support of an appeal |      | 1403 | 290                                   | 2403 | 145  | Request for oral hearing |      | 1451 | 1,510  | 1451 | 1,510 | Petition to institute a public use proceeding |      | 1452 | 110  | 2452 | 55 | Petition to revive - unavoidable |  | 1453 | 1,330 | 2453 | 665 | Petition to revive - unintentional |  | 1501 | 1,330 | 2501 | 665 | Utility issue fee (or reissue) |  | 1502 | 480 | 2502 | 240 | Design issue fee |  | 1503 | 640 | 2503 | 320 | Plant issue fee |  | 1460 | 130 | 1460 | 130 | Petitions to the Commissioner |  | 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17 (q) |  | 1806 | 180 | 1806 | 180 | Submission of Information Disclosure Stmt |  | 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) |  | 1809 | 770 | 2809 | 385 | Filing a submission after final rejection (37 CFR § 1.129(a)) |  | 1810 | 770 | 2810 | 385 | For each additional invention to be examined (37 CFR § 1.129(b)) |  | 1801 | 770 | 2801 | 385 | Request for Continued Examination (RCE) |  | 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application |  |
| Deposit Account Number   | 03-1620                   |              |          |  |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Deposit Account Name   | ChevronTexaco Corporation |              |          |  |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
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| Fee Code   | Fee (\$)                  | Fee Code     | Fee (\$) |  |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1051   | 130                       | 2051         | 65       | Surcharge - late filing fee or oath  |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1052   | 50                        | 2052         | 25       | Surcharge - late provisional filing fee or cover sheet.                    |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1053   | 130                       | 1053         | 130      | Non-English specification  |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1812   | 2,520                     | 1812         | 2,520    | For filing a request for reexamination                                     |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1804   | 920*                      | 1804         | 920*     | Requesting publication of SIR prior to Examiner action                     |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1805   | 1,840*                    | 1805         | 1,840*   | Requesting publication of SIR after Examiner action                        |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1251   | 110                       | 2251         | 55       | Extension for reply within first month                                     |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1252   | 420                       | 2252         | 210      | Extension for reply within second month                                    |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1253   | 950                       | 2253         | 475      | Extension for reply within third month                                     |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1254   | 1,480                     | 2254         | 740      | Extension for reply within fourth month                                    |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1255   | 2,010                     | 2255         | 1,005    | Extension for reply within fifth month                                     |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1401   | 330                       | 2401         | 165      | Notice of Appeal   |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1402   | 330                       | 2402         | 165      | Filing a brief in support of an appeal                                     |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1403   | 290                       | 2403         | 145      | Request for oral hearing   |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1451   | 1,510                     | 1451         | 1,510    | Petition to institute a public use proceeding                              |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1452   | 110                       | 2452         | 55       | Petition to revive - unavoidable   |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1453   | 1,330                     | 2453         | 665      | Petition to revive - unintentional   |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1501   | 1,330                     | 2501         | 665      | Utility issue fee (or reissue)   |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1502   | 480                       | 2502         | 240      | Design issue fee   |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1503   | 640                       | 2503         | 320      | Plant issue fee  |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1460   | 130                       | 1460         | 130      | Petitions to the Commissioner  |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1807   | 50                        | 1807         | 50       | Processing fee under 37 CFR 1.17 (q)                                       |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1806   | 180                       | 1806         | 180      | Submission of Information Disclosure Stmt                                  |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 8021   | 40                        | 8021         | 40       | Recording each patent assignment per property (times number of properties) |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1809   | 770                       | 2809         | 385      | Filing a submission after final rejection (37 CFR § 1.129(a))              |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1810   | 770                       | 2810         | 385      | For each additional invention to be examined (37 CFR § 1.129(b))           |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1801   | 770                       | 2801         | 385      | Request for Continued Examination (RCE)                                    |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1802   | 900                       | 1802         | 900      | Request for expedited examination of a design application                  |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <b>1. BASIC FILING FEE</b>   |                           |              |          | <b>2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE</b>                         |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1001</td><td>770</td><td>2001</td><td>385</td><td>Utility filing fee</td><td>770</td></tr> <tr><td>1002</td><td>340</td><td>2002</td><td>170</td><td>Design filing fee</td><td></td></tr> <tr><td>1003</td><td>530</td><td>2003</td><td>265</td><td>Plant filing fee</td><td></td></tr> <tr><td>1004</td><td>770</td><td>2004</td><td>385</td><td>Reissue filing fee</td><td></td></tr> <tr><td>1005</td><td>160</td><td>2005</td><td>80</td><td>Provisional filing fee</td><td></td></tr> </tbody> </table> <p style="text-align: right;"><b>SUBTOTAL (1)</b> (\$) 770</p> |                           |              |          | Large Entity   |          | Small Entity         |                           | Fee Description   | Fee Paid | Fee Code | Fee (\$) | Fee Code     | Fee (\$) | 1001         | 770 | 2001            | 385      | Utility filing fee | 770      | 1002     | 340      | 2002 | 170 | Design filing fee |    | 1003                                | 530 | 2003 | 265 | Plant filing fee |    | 1004  | 770 | 2004 | 385 | Reissue filing fee |     | 1005                      | 160 | 2005 | 80    | Provisional filing fee |       | <table style="width: 100%;"> <tr> <td style="width: 15%;">Total Claims</td> <td style="width: 10%;">58</td> <td style="width: 10%;">-20 **</td> <td style="width: 10%;">=</td> <td style="width: 10%;">38</td> <td style="width: 10%;">X</td> <td style="width: 10%;">18</td> <td style="width: 10%;">=</td> <td style="width: 10%;">684</td> </tr> <tr> <td>Independent Claims</td> <td>7</td> <td>-3 **</td> <td>=</td> <td>4</td> <td>X</td> <td>86</td> <td>=</td> <td>602</td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td></td> <td></td> <td></td> <td>X</td> <td>290</td> <td>=</td> <td>0</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1202</td><td>18</td><td>2202</td><td>9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>1201</td><td>86</td><td>2201</td><td>43</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>1203</td><td>290</td><td>2203</td><td>145</td><td>Multiple dependent claim, if not paid</td><td></td></tr> <tr><td>1204</td><td>86</td><td>2204</td><td>43</td><td>** Reissue independent claims over original patent</td><td></td></tr> <tr><td>1205</td><td>18</td><td>2205</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr> </tbody> </table> <p style="text-align: right;"><b>SUBTOTAL (2)</b> (\$) 1,286</p> |  |      |      | Total Claims | 58   | -20 **   | = | 38   | X      | 18   | =      | 684   | Independent Claims | 7    | -3 ** | =    | 4  | X                                      | 86 | =    | 602 | Multiple Dependent |     |   |  |      | X   | 290  | =   | 0                                      | Large Entity |      | Small Entity |      | Fee Description | Fee Paid                                | Fee Code | Fee (\$) | Fee Code | Fee (\$) | 1202  | 18                                     | 2202 | 9    | Claims in excess of 20 |      | 1201 | 86               | 2201 | 43   | Independent claims in excess of 3 |      | 1203 | 290                                    | 2203 | 145  | Multiple dependent claim, if not paid |      | 1204 | 86                       | 2204 | 43   | ** Reissue independent claims over original patent |      | 1205  | 18  | 2205 | 9    | ** Reissue claims in excess of 20 and over original patent |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Large Entity   |                           | Small Entity |          | Fee Description  | Fee Paid |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Fee Code   | Fee (\$)                  | Fee Code     | Fee (\$) |  |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1001   | 770                       | 2001         | 385      | Utility filing fee   | 770      |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1002   | 340                       | 2002         | 170      | Design filing fee  |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1003   | 530                       | 2003         | 265      | Plant filing fee   |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1004   | 770                       | 2004         | 385      | Reissue filing fee   |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1005   | 160                       | 2005         | 80       | Provisional filing fee   |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Total Claims   | 58                        | -20 **       | =        | 38   | X        | 18                   | =                         | 684   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Independent Claims   | 7                         | -3 **        | =        | 4  | X        | 86                   | =                         | 602   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Multiple Dependent   |                           |              |          |  | X        | 290                  | =                         | 0   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Large Entity   |                           | Small Entity |          | Fee Description  | Fee Paid |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Fee Code   | Fee (\$)                  | Fee Code     | Fee (\$) |  |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1202   | 18                        | 2202         | 9        | Claims in excess of 20   |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1201   | 86                        | 2201         | 43       | Independent claims in excess of 3  |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1203   | 290                       | 2203         | 145      | Multiple dependent claim, if not paid                                      |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1204   | 86                        | 2204         | 43       | ** Reissue independent claims over original patent                         |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1205   | 18                        | 2205         | 9        | ** Reissue claims in excess of 20 and over original patent                 |          |                      |                           |   |          |          |          |              |          |              |     |                 |          |                    |          |          |          |      |     |                   |    |                                     |     |      |     |                  |    |   |     |      |     |                    |     |                           |     |      |       |                        |       |   |  |      |      |              |      |  |   |      |        |      |        |   |                    |      |       |      |    |  |    |      |     |                    |     |   |  |      |     |      |     |  |              |      |              |      |                 |   |          |          |          |          |       |  |      |      |                        |      |      |                  |      |      |                                   |      |      |  |      |      |                                       |      |      |                          |      |      |  |      |       |   |      |      |  |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |

\*\*or number previously paid, if greater; For Reissues, see above

|                     |                  |                                   |        |                                 |                   |
|---------------------|------------------|-----------------------------------|--------|---------------------------------|-------------------|
| <b>SUBMITTED BY</b> |                  |                                   |        | <b>Complete (if applicable)</b> |                   |
| Name (Print/Type)   | SARITA R. KELLEY | Registration No. (Attorney/Agent) | 50,850 | Telephone                       | 925-842-1538      |
| Signature           |                  |                                   |        | Date                            | November 13, 2003 |

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